

Heidi Seever Gansert

Assembly District #25

Name (print)

Office (if applicable)

District (if applicable)

316 California Ave #302, Reno NV 89509 (775) 787-5814

Mailing Address (include city and zip code)

Telephone No.

26410

E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☐ PAC ☐ POL PRY ☐ IND EXP ☐ NONPROFIT CORP☐ LEGAL DEFENSE FUND ☐ AMENDED ☐ LOCAL BAG

- ☐ Annual Filing - Due January 15, 2010
Period: January 1, 2009 - December 31, 2009
- ☐ Report #1 - Due June 1, 2010*
Period: Jan. 1, 2010 - May 27, 2010
- ☐ Report #2 Due - October 26, 2010*
Period: May 28, 2010 - Oct. 21, 2010
- ☒ Report #3 Due - January 15, 2011**
Period: Oct. 22, 2010 - Dec. 31, 2010
- ☐ Annual Filing - Due January 15, 2011
Period: January 1, 2010 - December 31, 2010

H/D
FILED

JAN 13 2011

K. Rut
SECRETARY OF STATE
ELECTIONS DIVISION

FOR OFFICE USE ONLY

- * These Reports are filed by incumbents/candidates in the 2010 election cycle
- ** Third Report suffices for 2011 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
(See page 1 of instruction sheet)
2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans that were forgiven
(See page 2 of instruction sheet)

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

995.33 33,645.33

0

0

0

0

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

4. Total Amount of Monetary Contributions Received
(Add Lines 1 through 3) (See page 2 of instruction sheet)
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))
(See page 2 of instruction sheet)
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)

0

0

0

0

995.33 33,645.33

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100
(See page 2 of instruction sheet)
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)

0

0

1,045.00 88,917.06

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Date

1/12/11

Report Period # 3

Assembly District # 25
District (if applicable)

District (if applicable)

[illegible]

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CAMPAIGN EXPENSES

Report Period #3

Name (print)

Heidi Slevers Gansert

Office (if applicable)

Assembly District #25

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

